

ISDH Injury Prevention Advisory Council - Minutes from June 10, 2004 Meeting

Present: Sandra Beck, Nancy Cobb, Barbara Cole, Dawn Daniels, Bill Field, Judy Ganser, Charlene Graves, Mick Kidwell, Keisha Nickolson, Karen Stroup

Charlene Graves called the meeting to order and the minutes from the March 25, 2004 meeting were approved as read. Attention was called to the 4 information packets provided to Council members at this meeting and the sheet listing the complete contents of these packets. It was also confirmed that members had received electronic copies of the Draft of the report "Injuries in Indiana" prior to the meeting.

Charlene and Sandra reviewed the CDC Year 3 injury prevention continuation grant application submitted in April and the supplemental application for violence surveillance integration also submitted. The one-page ISDH strategic plan for the program covering years 2003-04 to 2007-08 was also distributed to all in attendance. The minutes from the initial meeting of the ISDH Trauma System/Emergency Preparedness Task Force meeting held on May 7th were also distributed.

The ISDH website has featured injury prevention topics in recent months, including automotive safety and lawnmower injury prevention. A reminder to report fireworks-related injuries again this year was also recently posted, along with easy access to the reporting form. Attention was called to the current emphasis on childhood drowning prevention through the research and an education campaign by the national Safe Kids organization, the Consumer Product Safety Commission press release on pool hazards, and the CDC press release and MMWR June 4th report on drownings. Recent ISDH information (press release, fact sheet, newsletter article) on lawn mower injuries was also distributed.

Reports from Council members were provided as follows:

Karen reported that the **Risk Watch** website is being finalized. Risk Watch plans to develop an Advisory Council and develop a 3-year plan, along with training of community partners in the fall. Keisha noted that 83 classrooms and 2,075 students had received Risk Watch training in the 2003-04 school year. Karen also noted there is an interactive tool/game on water safety for childcare providers that is titled Waterwise. Karen reviewed the progress made in the development of a city-wide calendar on **bicycle safety and helmet promotion**. This includes Flanner and Buchanan giving out 600-1,000 helmets each year for 3 years and another 1,000 helmet to be distributed at Black Expo in July.

Dawn noted that only 5% of children use helmets despite the give-aways. She also stated that the **Injury Free Coalition for Kids** is active with the focus for the East side of Indianapolis project being fall injuries, with data currently being collected for program planning and development. She expressed concern as to one's ability to get safety messages out to the population that

needs to hear them. Discussion ensued as to how to better market the need for children to wear bike helmets.

Mick described the ongoing efforts by **Indiana OSHA** in decreasing workplace-associated injuries and illness. He is involved in the Compliance Section and provided pamphlets to all attendees on BuSET, which is the Bureau of Safety Education and Training. This is an ongoing service that provides safety consultations to all types of businesses. He noted that the area of ergonomics is controversial at this time and responded to a question about heavy metal/lead poisoning that was raised. Bill, who formerly served on the IOSHA Commission, added that IOSHA efforts were hindered by the lack of funding provided and that seat belt use by workers should be better addressed. Mick stated that onsite consultations are prioritized based on the number of employees at a company and that there are not sufficient resources to meet the need.

Bill described the **CDC study on injuries in the Amish** that Purdue University is involved with and the 20th 1-day workshop given to that population. Altogether over 4,000 Amish family members in 3 counties have received this training. He noted the **6th Rural Safety Forum** to be held at the Farm Bureau Building in Indianapolis on September 15th.

Judy reported that the **2003-04 Youth Risk Behavioral Survey Surveillance (YRBSS)** data is now on the ISDH website. This is part of a CDC national program to define and monitor adolescent behaviors, based on a survey of high school students every 2 years. This is the first year that Indiana was able to collect weighted data so that the results are considered representative of all Indiana students.

Keisha reviewed the current drowning prevention campaign of the National **Safe Kids Program**, which was launched during the May 1st-8th annual Safe Kids Week, with research showing that most drownings take place while children are under adult supervision. She described a variety of initiatives that Safe Kids is involved in, including Walk This Way (pedestrian safety), a project to "round-up" dangerous consumer products from resale shops, and a faith-based project focused on safety seat/booster seat use. Also the **Automotive Safety Program** is studying Latino child safety seat mis-use and comparing the results to that from an 18-city Indiana mis-use survey done last summer.

Barbara distributed copies of the **Indiana Poison Center** Underutilization Study report that was completed in December 2003. This study consisted of focus groups held with parent of young children in 5 Indiana counties that seemed to underutilize the Poison Center service. She is also working on an adaptation of a Texas video, "Making the Right Call", for dissemination in Indiana. She expressed concern that her train-the-trainers program on injury

prevention program in young children does not appear to being disseminated by the trainees as much as desired.

Anna (**Department of Aging**) reported that the issue of falls in the elderly remains a huge problem, and expressed gratitude for the exchange of information that takes place at these Advisory Council meetings. She noted that there is a mortality review committee for all deaths that take place within state institutions.

Nancy described the new efforts to collect data on adult lead poisoning. She stated that an aggressive State Childhood **Lead Poisoning** Elimination Plan has been completed for CDC, with the goal of complete elimination by 2010. Some discussion was held on the problems surrounding workers in battery recycling factories who “take home” lead to family members.

Discussion then focused on feedback for the Injuries in Indiana draft report, with the following comments provided:

- 1) An executive summary is needed, which is written so that it can be understood by a general audience, also a description of the general demographics of Indiana.
- 2) Who is the target audience for this publication? Is it policy makers, professionals, the lay public? (Charlene suggested that the policy makers are the target of a future companion document – the State Injury Prevention Plan - and that the current report should be a reference document, providing the data that is used to develop the State Plan forthcoming within one year. Bill felt that the State Plan should be evidenced based as much as possible, and include education and engineering recommendations, and should “rattle some chains”.)
- 3) The prevention messages and website resources should be removed and placed into the future State Injury Plan and/or future Fact Sheets.
- 4) A Section on violence –related (intentional) injuries is needed.
- 5) The YRBSS and BRSS data pertinent to injuries should be added
- 6) The data in the report should be translated into Fact Sheets in the future, for example one on Falls in the Elderly.
- 7) Age-adjusted rates and how they are calculated should be explained in a footnote early in the report.
- 8) A section on special populations would be useful, e.g., the Amish, persons with disabilities, agricultural families, Hispanics/Latinos.(Bill Field agreed to write additions on agricultural injuries and injuries in the Amish, Mick Kidwell agreed to try to provide a Section on occupational injuries.)
- 9) Are there too many graphs? Answer was no, just need more summarization.

- 10) What is included and excluded in the hospital discharge data?
Re 23-hour stays, outpatient surgery, does NOT include emergency department data.
- 11) More emphasis on the undercount of injuries related to the lack of E codes
- 12) Consider adding cost data related to hospital discharges.

Charlene requested additional comments and the “volunteer” additional Sections be sent to either Sandra (sbeck@isdh.state.in.us) or herself (cgraves@isdh.state.in.us) by the end of June. The goal is to complete the final document for electronic dissemination and publication of a limited number of print copies in August 2004.

Charlene also passed around her copy of the Colorado Injury Prevention Strategic Plan, 2003-2008, with the recommendation that this type of document be a model for the development of Indiana’s State Plan. Colorado’s plan focuses on 3 major injury problems: motor vehicle and related non-traffic injuries, falls, and suicide. It includes goals, action steps, and recommendations and covers facts and trends, best practices and strategies for injury prevention, special considerations, barriers and challenges and resources for each of the three injury categories, after the introduction and general recommendations sections, in a document that is 43 pages long and easy to read.

Because of the extensive business transacted, the meeting time was extended by about an hour. Charlene thanked the members for their contributions and their willingness to extend their time to accomplish the tasks at hand.

The next meeting is scheduled for Thursday September 9th, 10:30 AM to Noon.